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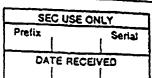
AUG 2 3 2001

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	ROVAL
OMB Number.	3235-0076
Expires: Auc	nust 31 1000
Estimated average	le burden
hours per respon	se 16.00



Name of Offering (check if Convertible Note Du	I this is an amendment and name has changed, and i	indicate change.)
Filing Under (Check box(es) that		6 🗆 Section 4(6) 🗇 ULOE
Type of Filing:	☐ Amendment	•
* .	A. BASIC IDENTIFICATION DAT	A
1. Enter the information request	ed about the issuer	
Name of Issuer (check if the	nis is an amendment and name has changed, and indi	icate change.)
FastShip. Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
123 Chestnut Street	Philadelphia, PA 19106	(215) 574-1770
Address of Principal Business Of (if different from Executive Offi	perations (Number and Street, City, State, Zip Code ces)	Telephone Number (Including Area Code)
Brief Description of Business		
Commercial cargo vesse	el design and operation BEST AVAILABLE	01073663
Type of Business Organization © corporation	☐ limited partnership, already formed	other (please specify): PROCESSE
D business trust	☐ limited partnership, to be formed	•
Actual or Estimated Date of Inc Jurisdiction of Incorporation or	Organization: Month Year Organization: O Q 7 Organization: (Enter two-letter U.S. Postal Service a	AUG 2 7 2001 Actual Estimated THOMSON FINANCIAL abbreviation for State:
GENERAL INSTRUCTIONS		•
et seq. or 15 U.S.C. 77d(6).	ig an offering of securities in reliance on an exemption	
the IIC Constition and Exchang	filed no later than 15 days after the first sale of secu e Commission (SEC) on the earlier of the date it is re edate on which it is due, on the date it was mailed by Ur	received by the SEC at the address by the order of
Where to File: U.S. Securities a	nd Exchange Commission, 450 Fifth Street, N.W., V	Vashington, D.C. 20549.
Copies Required: Five (5) copies	of this notice must be filed with the SEC, one of which the manually signed copy or bear typed or printed signed.	n must be manually signed. Any copies not manually

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conver fallure to file the appropriate federal notice will not result in a loss of an available state exemption u exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid CMB control number.

A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

1 of 8

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partn
Full Name (Last name first, if individual) Pederson, Einar				
Business or Residence Address (Number	and Street, City, State, 2	Zip Code)		
123 Chestnut Street, Suite 204,	Philadelphia, PA 191	06		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partn
Full Name (Last name first, if individual)				
Bullard II, Roland K.			è	
	and Street, City, State, 2	Zip Code)		
123 Chestnut Street, Suite 204,	Philadelphia, PA 19	106	,	
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partn
Full Name (Last name first, if individual) Chambers, Kathryn Riepe				
Business or Residence Address (Number	and Street, City, State, 2	Zip Code)		
123 Chestnut Street, Suite 204,	, Philadelphia, PA	19106		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Parts
Full Name (Last name first, if individual) Giles, David L.				
Business or Residence Address (Number 123 Chestnut Street, Suite 204,				
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partn
Full Name (Last name first, if individual) Colgan, Dennis				
Business or Residence Address (Number	and Street, City, State, 2	Zip Code)		•
123 Chestnut Street, Suite 204,	Philadelphia, PA 193	106		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Parts
Full Name (Last name first, if individual) Riverfront Development Corporat	ion			
Business or Residence Address (Number 701 North Broadway, Glouchester	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partr
Full Name (Last name first, if individual)				

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l. Has	the issuer s	old, or do	es the issu	er intend	to sell, to	non-accre	dited inves	tors in this	offering?		• • • • • • • •	Yes	No CJ
			An	swer also i	in Appendi	ix, Columi	a 2, if filic	ig under U	LOE.				
2. Wha	t is the mir	imum inv	estment th	at will be	accepted !	from any i	ndividual?				• • • • • • • • • •	<u>\$10.</u>	000
												Yes	No
	the offeri								• •			.	ū
sion o to be list ti	r the inform or similar re : listed is ar he name of :aler, you r	emuneration associate the broke	on for solic d person c r or dealer	itation of a gent of a gent of the contract of	purchasers a broker o than five (in connect or dealer re (5) persons	ion with sa egistered w to be liste	des of secu ith the SE d are asso	rities in the C and/or v	offering.	lf a person	3	•
Full Name	(Last nan	ne first, if	individual)									
N/A													
	r Residenc	e Address	(Number	and Street	City Sta	te Zin Co	vde)						
			(114111061	<u> </u>	, 0.1.), 0.1.	,	, ,						
Name of .	Associated	Broker or	Dealer										
States in '	Which Pers	on Listed	Has Solici	ted or Int	ends to So	licit Purch	asers				· ·		
(Check	"All States	" or chec	k individu	al States)	• • • • • • • • •						• • • • • • •		States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	{ HI }	[ID]]
[IL]	[1N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	[NE]	[NV]	[NH]	[N]]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[R1]	[SC]	[SD]	[NT]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	{WI}	[WY]	[PR	J ·
Full Name	e (Last nan	ne first, if	individual)									
N/A					•								
Business o	or Residence	e Address	(Number	and Street	, City, Sta	ite, Zip Co	ode)						
											•		
Name of	Associated	Broker or	Dealer			· ·							
States in	Which Pers	on Listed	Has Solic	ited or Int	ends to Sc	licit Purcl	135655						
	"All State											□ All	States
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[w1]	[WY]	[PR	1
Full Nam	e (Last nar	ne first, if	individua	n)	-								
N/A													
	or Resident	e Address	Number	and Stree	t City St	ate Zin C	ode)						
Dayiness .	or resident	e Addies	i (i vaimbei)	ale succ	i, City, 30	ate, ap	ouc,						
	A	D1											
Name of	Associated	proker o	Dealer										
. 													
	Which Per					olicit Purc	hasers					☐ All	State
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[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA] [MN]	[HI] [MS]	[MC	
[IL] [MT]	[IN] [NE]	[IA] [NY]	{ KS } {NH}	[KY] [NJ]	[LA] [NM]	[ME]	[MD] [NC]	[MA] [ND]	[M1] [OH]	[OK]	[OR]	[PA	_
[RI]	ISC 1	[SD]	(TN)	ITX	[UT]	ITVI	[AV]	[WA]	[WV]	[WI].	[WY]	(PF	

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Pric	Amount Already Sold
	Debt	•	
	Equity		_ s
	□ Common □ Preferred	:	
	Convertible Securities (including warrants)	\$ 50.000	\$ 50,000
	Partnership Interests	\$	_ \$
	Other (Specify)	s	. S
	Total	\$ 50,000	\$ 50,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 50,000
	Non-accredited Investors		_ s
	Total (for filings under Rule 504 only)		_ s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		
	Regulation A	·	_ \$
	Rule 504		_ \$
	Total		_ S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	(S
	Printing and Engraving Costs		s
	Legal Fees		s 1,000
	Accounting Fees		s
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)		s

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

, 	C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES	IND USE OF PROCE	ens :
	. Enter the difference between the aggregate offerion 1 and total expenses furnished in response to P adjusted gross proceeds to the issuer."	ng price given in response to Part	C - Ques-	\$ 49,000
	ndicate below the amount of the adjusted gross pro- sed for each of the purposes shown. If the amount stimate and check the box to the left of the estimate, he adjusted gross proceeds to the issuer set forth in	t for any purpose is not known, The total of the payments listed	furnish an	
		•	Payments of Officers, Directors, Affiliates	& Payments To Others
	Salaries and fees	•••••	XXX \$ 20,000	S_9.000
	Purchase of real estate	*******	🗆 S	D S
	Purchase, rental or leasing and installation of m	achinery and equipment	🗆 \$	🗆 \$
	Construction or leasing of plant buildings and f	acilities	🗆 5	O S
	Acquisition of other businesses (including the va offering that may be used in exchange for the a issuer pursuant to a merger)	ssets or securities of another		D S
	Repayment of indebtedness	*************************	🖸 s	🗆 \$
	Working capital	*************	🗆 S	20,000
	Other (specify):		C \$	C \$
				🗆 \$
	Column Totals	******************************	E \$ 20,000	<u>\$ 29,000</u>
	Total Payments Listed (column totals added)	•••••	23 \$	49,000
	D	FEDERAL SIGNATURE		·
follo	issuer has duly caused this notice to be signed by the wing signature constitutes an undertaking by the issuer to fits staff, the information furnished by the issuer.	he undersigned duly authorized pour to furnish to the U.S. Securi	ies and Exchange Com	mission, upon written re-
Issu	er (Print or Type)	Signature	Tr.	Date 8/22/01
	tShip, Inc.	Ling Rep Che	<u>.</u>	8/22/01
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Ka	chryn Riepe Chambers	Executive Vice President		

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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7 .1 51	。	ESTATE SIGNATURE OF THE PROPERTY OF	·/· s
	uny party described in 17 CFR 230.252(c), (such rule?	d), (e) or (f) presently subject to any of the disqualific	cation provisions Yes No
•	See Ap	pendix, Column 5, for state response.	
	undersigned issuer hereby undertakes to fum D (17 CFR 239.500) at such times as req	rnish to any state administrator of any state in which quired by state law.	this notice is filed, a notice on
	undersigned issuer hereby undertakes to fuer to offerees.	mish to the state administrators, upon written request,	, information furnished by the
limi	ted Offering Exemption (ULOE) of the state	er is familiar with the conditions that must be satisfied e in which this notice is filed and understands that the ag that these conditions have been satisfied.	to be entitled to the Uniform issuer claiming the availability
	er has read this notification and knows the coned duly authorized person.	contents to be true and has duly caused this notice to	be signed on its behalf by the
lssuer (P	rint or Type)	Signature	Date
FastS	hip, Inc.	Kathy Repu Club	8/22/01
Name (P	rint or Type)	Title (Print or Type)	
Kathr	yn Riepe Chambers	Executive Vice President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed. signatures.

1		2	3	4 5					
	to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Number of	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
State	Yes	No		Accredited Investors	Amount	Number of Non-Accredited Investors	A -	••	
AL	16	140	,	ZUTESCOIS	Amount	THAMPIOLE	Amount	Yes	No
AK									
AZ									
AR									
CA			ı						
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CT									
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1	Intend to non-a investor	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		amount pur	investor and chased in State C-Item 2)		Disqual under Sta (if yes, explana waiver	ification te ULOE attach ation of granted) -Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT.			·								
NE			·								
NV											
ИН											
נא											
NM			A								
NY											
NC							·.				
ND											
ОН					 						
OK											
OR											
PA		x	Convertible Note	1	\$50,000	0	0		x		
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